

THE CASE MANAGER COMMUNIQUÉ



Disease State Management

Chronic conditions and diseases detrimentally affect the quality of life of thousands of Virginians. To address this challenge, the Department of Medical Assistance Services (DMAS) is pleased to announce the expansion of the *Healthy ReturnsSM* Disease Management program. *Healthy ReturnsSM* is part of the "Healthy Virginians" initiative and provides targeted services to patients diagnosed with **coronary artery disease, congestive heart failure, asthma, and/or diabetes**. A special focus will be placed on services for children with asthma and children with diabetes.

Healthy ReturnsSM is offered to all fee-for-service Medicaid and FAMIS enrollees with the exception of:

- Individuals enrolled in Medicaid/FAMIS managed care organizations (MCOs);
- Individuals enrolled in Medicare (dual eligibles);
- Individuals who live in institutional settings (such as nursing facilities); and
- Individuals who have third party insurance.

Healthy ReturnsSM is unique in that it will include individuals who receive home and community-based waiver services. Medicaid beneficiaries enrolled in Medicaid MCOs already receive similar DM services through their MCOs.

Healthy ReturnsSM is administered by Health Management Corporation (HMC) and offers care management, a 24-hour nurse call line, and evidence-

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based treatment protocols. Initially, eligible patients must proactively enroll in *Healthy ReturnsSM*, however DMAS plans to establish automatic enrollment for eligible patients by summer 2006.

If you have questions about the program, call 1-866-836-4008 toll-free. More information is available on the DMAS website at

<http://www.dmas.virginia.gov/dsm.htm> ☎



DMAS will no longer pay claims with dates of service after the coverage cancellation date for clients enrolled in this program, with the exception of acute medical/surgical inpatient hospitalizations reimbursed by the AP Diagnostic Related Group (DRG) methodology.

DMAS-covered Katrina evacuees who plan to remain in Virginia may be eligible for continued medical assistance under Virginia Medicaid or FAMIS. Evacuees who intend to remain in Virginia are encouraged to apply for Virginia Medicaid or FAMIS benefits through their local Department of Social Services (DSS) office. Applications are available online at:

<http://www.dss.virginia.gov/form/index.html> or by visiting or contacting your LDSS. The telephone number for your LDSS can be found on-line at: <http://www.dss.virginia.gov/localagency/index.html> or in your local phone book. ☎

Hurricane Katrina Update

The temporary, fee-for-service DMAS health care coverage for victims of Hurricane Katrina (outlined in the September 8, 2005 Medicaid Memorandum) is being phased out based on the date of application for these clients. This process began in January and will be completed on April 30, 2006, when coverage for all related clients will cease.

All Katrina evacuees will be given notice of the cancellation of their benefits by mail prior to the date of their cancellation.

Prior Authorization Contractor

DMAS is pleased to announce the award of a new Prior Authorization (PA) contract to KePRO, an innovative healthcare management solution company. KePRO will conduct the prior authorization process for Medicaid, FAMIS and FAMIS Plus clients in the fee-for-service programs that are currently being performed by WVMi and the Department.

Providers will immediately notice improvements to the prior authorization process such as:

- An internet accessible, web-based prior authorization interactive request and response function;
- A primarily paperless process for faster service and reduced provider administrative burden; and
- Utilization of InterQual criteria when appropriate.

Prior authorization functions will be phased in through May and June 2006 as follows:

- Phase I will be implemented in May 2006 and include outpatient psychiatric services;
- Phase II will be implemented June 2006 and include the traditional services of inpatient review, outpatient review (excluding outpatient psychiatric services), and EPSDT;
- Phase III will be implemented in mid June 2006 and include the Medicaid specific services of specialized behavioral health, community based care.

DMAS will be issuing additional information to providers in various mailings and educational presentations in April and May 2006. Site training and web based training will be available statewide in April and May 2006. Providers will be required to register with KePRO in order access the web technology. The form and process will be available by April 1st.

Further information regarding the new PA program will be available on the DMAS website at www.dmas.virginia.gov and the KePRO website at www.kepro.org as it becomes available. Should you have any questions regarding the prior authorization program, please send your inquiries via e-mail to PAUR06@dmas.virginia.gov. ☎

SMILES FOR CHILDREN

GOOD NEWS

Since the implementation of the Smiles for Children program in July 2005, Virginia Medicaid has added 135 new dentists for a total of 755 participating providers! The localities of Amelia, Brunswick, Charles City, Highland, Madison and Prince George, which previously had no Medicaid dental providers, now have dentists to serve the children. Preliminary analysis of the first six months of claims data indicates an upward trend in the number of children receiving care.

FIND A DENTIST

Visit the DMAS website and test the 'Locate a Dentist' feature. This is a direct link to the Doral website where you can search for a participating dentist by the recipient's zip code within a certain mile radius. The search feature defaults to providers who are accepting new patients. You can access this new feature by going to

<http://www.dmas.virginia.gov/dental-home.htm> or <http://www.doralusa.com/FindAProvider/FindAProvider.aspx>

NEW FEATURE! AUTOMATED PHONE SYSTEM

Doral Dental implemented an enhanced automated phone system for the Smiles for Children program on February 8, 2006. Providers are now able to check a member's eligibility along with a limited claim history through this automated system. Members can verify eligibility and find a dentist through the automated system by entering a zip code. Services are available in Spanish and English. ☎



Smiles For Children
Improving Dental Care Across Virginia

Merger Between Anthem & UniCare

The merger of two Virginia Medicaid-contracted managed care organizations (MCOs): Anthem HealthKeepers Plus and UniCare Health Plan of Virginia became effective January 1, 2006. This merger affected former UniCare Medicaid and FAMIS eligible enrollees and providers in the following localities:

Northern Virginia

Alexandria	Fauquier	Arlington
Loudoun	Fairfax City	Manassas
Fairfax Co	Manassas Park	Falls Church
	Prince William	

Charlottesville and Surrounding Areas

Albemarle	Louisa	Buckingham
Madison	Charlottesville	Nelson
Fluvanna	Orange	Greene

Under the merger, Anthem HealthKeepers Plus now covers all UniCare Health Plan Medicaid and FAMIS enrollees in the Northern Virginia and Charlottesville regions. If providers/case managers have questions about the transition process, authorizations, case management, or if providers have a patient enrolled with UniCare Health Plan who requires special assistance, contact Anthem HealthKeepers Plus at 1-804-354-2660. For behavioral health issues, please call 1-800-991-6045. For ancillary provider issues, call 1-804-354-2338.

After January 1, 2006, Northern Virginia Medicaid and FAMIS individuals enrolled in managed care will carry a card bearing the name of either Anthem HealthKeepers Plus or AMERIGROUP, Inc. In the Charlottesville area, Medicaid and FAMIS individuals in managed care will carry an Anthem HealthKeepers Plus, Optima Family Care, or Virginia Premier Health Plan ID card. All MCO ID cards include the recipient's Virginia Medicaid ID number.

In late December 2005, Anthem HealthKeepers Plus sent UniCare Health Plan of Virginia enrollees an Anthem HealthKeepers Plus member packet with an ID card, benefits booklet, provider directory, and other Anthem HealthKeepers Plus information explaining coverage. Recipients receiving primary care from a physician who has a contract with Anthem HealthKeepers Plus will be able to continue to see the same primary care physician (PCP). Enrollees who are assigned to a UniCare Health Plan of Virginia provider

who has not contracted with Anthem HealthKeepers Plus will be able to pick another PCP or will be assigned to another Anthem HealthKeepers Plus PCP. Enrollee questions about coverage and selecting a PCP should be directed to Anthem HealthKeepers Plus Member Services at 1-800-901-0020.

While annual open enrollment is usually held in the summer for the Northern Virginia area and in the fall for the Charlottesville area, in order to provide enrollees with enough time to make the right provider choice for themselves, former UniCare Health Plan of Virginia enrollees in these affected areas who are new to Anthem HealthKeepers Plus will be able to change to another plan in their area until March 31, 2006.

Medicaid recipients may also contact the Managed Care HELPLINE at 1-800-643-2273 if they have questions about MCOs or their PCP. More information on managed care is available on the DMAS website at www.dmas.virginia.gov/mc-home.htm

Questions about FAMIS should be directed to the FAMIS Central Processing Unit (CPU) at 1-866-87FAMIS (873-2647). More information on FAMIS is available on the FAMIS website at www.famis.org

AMERIGROUP, Inc.

□ Member Services: 1-800-600-4441

Anthem HealthKeepers Plus

□ Member/Provider Services: 1-800-901-0020

Optima Family Care

Member Services: 1-800-881-2166

Virginia Premier Health Plan

Member Services: 1-888-338-4579 ☎



The choices a person makes are often based on the things that are most important to him or her, such as dreams for a happy life filled with friends and family, and doing things that matter.

Transportation

The location of inspection sticklers on the vehicles of LogistiCare providers has moved from the back window to the bottom left corner of the rear window of their passenger side. Stickers are green if they passed inspection, yellow if they had minor infractions (not safety related) that will be fixed within 10 days. No sticker means the vehicle should not be transporting Medicaid recipients. No sticker? Call LogistiCare at 1-866-386-8331.

Any irregularities in the vehicles, such as the heat or AC is not working, windows broken, trash on the floor, passengers not belted in, etc, should be reported to LogistiCare. When you contact them, provide the name of the provider/company, the problem, and the license plate number, if possible. LogistiCare can also find the vehicle if they only have the name of the passenger. ☺

Medicare Part D

On January 1, 2006, the new Medicare Part D Prescription Drug Program became effective. On this date, 100,000 low-income seniors and people with disabilities eligible for both Medicaid and Medicare (dual eligibles) who previously received their prescription drug coverage through the Virginia Medicaid program began receiving their prescription drug coverage through the Medicare Part D program.

There are specific drug classes that are excluded under the new Medicare Part D program. Virginia Medicaid will continue to cover these medications within the currently established pharmacy guidelines. Any prescription drug claims processed for dual eligibles by Virginia Medicaid will remain subject to Virginia Medicaid's Preferred Drug List (PDL).

The Centers for Medicare and Medicaid Services (CMS) contracted with private prescription drug plans (PDPs) to administer the new benefit program. There are 16 PDPs operating in Virginia. A state-specific, formulary search is available on the CMS website at this link:

<http://plancompare.medicare.gov/formularyfinder/selectstate.asp>

For additional information, visit the DMAS website at http://www.dmas.virginia.gov/private/medicare_part_d.htm ☺

Self-Directed Services

Self-direction is a different way of supporting people with disabilities. It makes the voice of the person with a disability the focus and respects a person's choices about his or her life.

DMAS was awarded a grant from the Centers for Medicare and Medicaid in 2003 to work with the Partnership for People with Disabilities on developing materials and training modules on consumer-directed (CD) services in Virginia's waivers.

A website was developed through grant funding and has become an excellent resource on self-direction for Virginians with disabilities who wish to direct their own community-based care. Please visit www.vcu.edu/partnership/cdservices to learn more about self-direction and CD services in Virginia. ☺

Consumer-Directed Services

DMAS is currently soliciting proposals from experienced, qualified organizations to perform fiscal agent services for consumer-directed services. Specific details about this Request for Proposals (RFP) 2006-06 are on the DMAS website at www.dmas.virginia.gov.

Consumer-directed attendants provide services to eligible recipients in the following programs: 1) Mental Retardation (MR) Waiver, 2) Individual and Family Developmental Disabilities Support (DD) Waiver, 3) HIV/AIDS Waiver, 4) Elderly or Disabled with Consumer-Direction (EDCD) Waiver, and 5) Early and Periodic Screening, Diagnosis and Treatment (EPSDT).

The successful fiscal agent will manage the fiscal agent services for consumer-directed recipients and ensure appropriate and timely payments are made to attendants and have State and Federal income taxes and employment taxes withheld, filed and paid in an accurate and timely manner.

The timeframe for the transition of these services to the new fiscal agent should occur during the summer of 2006. ☺

Case Manager's Meetings

The next scheduled series of case managers' meetings will be held in five sites around the Commonwealth during the months of April and May. At these meetings brief presentations will be made regarding Medicaid Home and Community Based Care Waivers, Medicare Part D, the Healthy Returns Disease Management Program and other topics of general interest. We invite you to utilize these meetings as a means to enhance your knowledge about these subjects. Due to limited space we ask that you respond by contacting Pamela Richardson at (804) 692-0270 no later than Wednesday, March 29, 2006.

Friday, April 7, 2006
10:00 a.m. - 12:00 Noon
Riverside Regional Medical Center
Annex Conference Center
500 J. Clyde Morris Boulevard
Newport News, VA
Building D Classrooms E and F

Tuesday, April 11, 2006
10:00 a.m. - 12:00 Noon
Johnston Willis Hospital
1401 Johnston Willis Drive
Richmond, VA
Atrium Auditorium

Tuesday, April 25, 2006
10:30 a.m. - 12:30 p.m.
Fairfax County Government Center
12000 Government Center Parkway
Fairfax, VA 22035
Conference Rooms 2-3

Wednesday, April 26, 2006
10:00 a.m. - 12:00 Noon
Frederick County Office Building
107 N. Kent Street
Winchester, VA 22601
Building 107, Sunshine Room (Third Floor)

Thursday, May 4, 2006
10:00 a.m. - 12:00 Noon
Roanoke County Library, Hollins Branch
6624 Peters Creek Road
Roanoke, VA 24019



Monitoring Kidney Functions

As directed by the 2005 General Assembly, DMAS is pleased to announce a new partnership with the Medical Advisory Board of the National Kidney Foundation of the Virginias (NKF-VAs), the Nephrology Division of the University of Virginia Health System, the Mid-Atlantic Nephrology Associates, the Virginia Primary Care Association (VPCA), and Anthem-WellPoint. The partnership is intended to help raise awareness among providers serving Virginia Medicaid beneficiaries about the health risks of chronic kidney disease (CKD) and to encourage the use of estimated glomerular filtration rate (eGFR) values.

According to the National Institutes of Health, 10 to 20 million Americans have kidney disease, and most are not aware of it. The elderly, African Americans, Latinos, Asians, and Pacific Islanders are at a higher risk of developing kidney disease. There are no specific symptoms of the early stages of kidney disease. As a result, most patients only become aware of their condition after it has progressed to end stage renal disease, which is life-threatening.

To assist physicians and other health care professionals with classifying and monitoring patients who suffer from kidney disease, the National Kidney Foundation (NKF) recently revised the Kidney Disease Outcomes Quality Initiative (KDOQI) Clinical Practice Guidelines. The KDOQI guidelines classify patients into five disease stages based on their estimated glomerular filtration rate (eGFR) values. The eGFR is a measure of how well the patient's kidneys are filtering wastes from the blood.

The NKF recommends that individuals be tested annually to determine if they are at risk for kidney disease. To learn more about chronic kidney disease and the services and programs of the National Kidney Foundation of the Virginias, call 1-804-288-8342 or visit the website at www.kidneyva.org. Additional information can also be obtained by calling the National Kidney and Urologic Diseases Information Clearinghouse at 1-800-891-5390 or by visiting the National Kidney Disease Education Program's website at: www.nkdep.nih.gov/professionals/chronic_kidney_disease.htm

